Revision: HCFA-PM-95-4 JUNE 1995

(HSQB)

Attachment 4.35-F

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State/Territory: ____COLORADO

ELIGIBILITY CONDITIONS AND REQUIREMENTS Enforcement of Compliance for Nursing Facilities

State Monitoring: Describe the criteria (as required at \$1919(h)(2)(A)) for applying the remedy.

X Specified Remedy

__ Alternative Remedy

(Will use the criteria and notice requirements specified in the regulation.)

(Describe the criteria and demonstrate that the alternative remedy is as effective in deterring non-compliance. Notice requirements are as specified in the regulations.)

Supersedes

Approval Date: 11/27/95

Effective Date: 7-/-95